



Inventor(s): Jian Dong  
 Serial No. 09/945,306  
 Filed : August 30, 2001  
 For : INTEGRATED MULTIPLE DEPENDENT OPTIMIZATION PROCESS FOR THERMAL PROTECTION SYSTEM  
 DESIGN

COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

27431

(Insert Customer Number)

Sir:

Transmitted herewith is an amendment in the above-identified patent application.

- Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.  
 Return Receipt Postcard  
 No additional claim fee is required.

The fee has been calculated as shown below:

|  | (Col. 1)<br>CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | (Col. 2)<br>HIGHEST<br>NUMBER.<br>PREVIOUSLY<br>PAID FOR | (Col. 3)<br>PRESENT<br>EXTRA | SMALL<br>ENTITY<br>RATE | ADDIT.<br>FEE | OR | OTHER THAN A<br>SMALL ENTITY |
|--|---|-------|--|------------------------------|-------------------------|---------------|----|------------------------------|
| Total  | *20   | minus | **26   | = 0                          | x \$25 =                | \$            | OR | RATE                         |
| Independent                                    | *3  | minus | ***4   | = 0                          | x \$100 =               | \$            | OR | +50 = \$0                    |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |  | +150 =                       | \$                      |               | OR | x200 = \$0                   |
|  |   |       |  | TOTAL                        | \$                      |               | OR | +300 = \$0                   |
|  |   |       |  |                              |                         |               | OR | TOTAL \$0                    |

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- Please charge my Deposit Account No. 50-0851 the amount of \$\_\_\_\_\_. A copy of this transmittal letter is enclosed.  
 A check in the amount of \$\_\_\_\_ to cover the extension fee is enclosed.  
 A check in the amount of \$\_\_\_\_ to cover the additional claims is enclosed.  
 The Commissioner is hereby authorized to charge payment of the following fees with this communication or credit any overpayment to Deposit Account No. 50-0851. A duplicate copy of this transmittal letter is enclosed.  
 Any filing fees under 37 CFR 1.16 for the presentation of extra claims.  
 Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

on May 9, 2005  
  
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PATENT  
091-0110

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: JIAN DONG : Confirmation No.: 2047

Serial No. 09/945,306 : Group Art Unit: 2123

Filed: August 30, 2001 : Examiner: Samuel Broda

For: INTEGRATED MULTI-DISCIPLINARY  
OPTIMIZATION PROCESS FOR THERMAL  
PROTECTION SYSTEM DESIGN

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA

AMENDMENT AND RESPONSE

Sir:

In response to the Office action dated as mailed on February 10, 2005 and having a period of response extending through and including May 10, 2005, please make the below-identified amendments, and consider the following remarks.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 8 of this paper.